

USTB Reviewer Signature \_\_\_\_\_

AI # \_\_\_\_\_

Claim Reviewer Signature \_\_\_\_\_

**REIMBURSEMENT WORKSHEET****OVER-EXCAVATION****(1) Mobilization and Demobilization of Heavy Equipment and Oversight Personnel to the Regulated Facility**

\_\_\_\_\_ miles x \$3.50 = \$0.00 Equipment  
 (round trip) minimum \$350.00  
 \_\_\_\_\_ miles x \$1.75 = \$0.00 Personnel oversight  
 (round trip)  
 5 miles x \_\_\_\_\_ = \$0.00 additional mileage **\$0.00**  
 (enter the number of days of overnight stay)  
 The one way mileage from the contractors office to the facility is \_\_\_\_\_ miles.

**(2) Per Diem**

\_\_\_\_\_ days x \$110.00 = \$0.00 **\$0.00**

**(3) Field Equipment**

\_\_\_\_\_ days x \$150.00 = \$0.00 Equipment  
 \_\_\_\_\_ days x \$50.00 = \$0.00 Tools of the Trade **\$0.00**

**(4) Asphalt Removal**

Pad \_\_\_\_\_ x \_\_\_\_\_ = 0  
 (length) (width) (sq.ft.)  
 0 x \_\_\_\_\_ = \$0.00 **\$0.00**  
 (thickness)

**(5) Concrete Removal**

4" thick	_____ sq.ft.	x	\$0.50	=	\$0.00	
4" thick w/ rebar	_____ sq.ft.	x	\$0.58	=	\$0.00	
6" thick	_____ sq.ft.	x	\$0.75	=	\$0.00	
6" thick w/ rebar	_____ sq.ft.	x	\$0.86	=	\$0.00	
9" thick	_____ sq.ft.	x	\$1.45	=	\$0.00	
9" thick w/ rebar	_____ sq.ft.	x	\$1.67	=	\$0.00	
10" or more	_____ sq.ft.	x	\$3.90	=	\$0.00	
10" or more w/ rebar	_____ sq.ft.	x	\$4.49	=	\$0.00	<b>\$0.00</b>

**(6) Transportation and Disposal of Asphalt or Concrete at a Disposal Facility**

_____ tons	x	\$42.80	=	\$0.00	(within 50 miles)
_____ tons	x	\$55.60	=	\$0.00	(50 to 100 miles)
_____ tons	x	\$68.40	=	\$0.00	(over 100 miles)

**\$0.00**

**(7) Excavation of Contaminated Material**

minimum \_\_\_\_\_ tons x \$4.50 = \$0.00  
 = \$2,250.00 **\$0.00**

**(8) Purchase and Transportation of Backfill (soil or rock)**

_____ tons	x	\$13.30	=	\$0.00	(within 50 miles)
_____ tons	x	\$16.60	=	\$0.00	(50 to 100 miles)
_____ tons	x	\$19.90	=	\$0.00	(over 100 miles)
from borrow area _____ tons	x	\$6.00	=	\$0.00	<b>\$0.00</b>

(only allowed if soil disposed of at a landfill)

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<b>REIMBURSEMENT WORKSHEET</b>	
<b>OVER-EXCAVATION</b>	
<b>(9) Install, Compact, and Grade Backfill:</b> (soil or rock or if replaced in lifts)	
_____ tons x \$4.00 =	<b>\$0.00</b>
<b>(10) Transportation and Disposal of Contaminated Material at a Disposal Facility</b>	
_____ tons x \$42.80 =	\$0.00 (within 50 miles)
_____ tons x \$55.60 =	\$0.00 (50 to 100 miles)
_____ tons x \$68.40 =	<b>\$0.00</b> (over 100 miles)
<b>(11) Treatment of Contaminated Material by Thermal Desorption, Landfarming, or Other Method</b>	
_____ tons x \$50.37 =	\$0.00 (within 50 miles)
_____ tons x \$63.17 =	\$0.00 (50 to 100 miles)
_____ tons x \$75.97 =	<b>\$0.00</b> (over 100 miles)
<b>(12) Pumping, Treatment and Discharge of Contaminated Water from a Mobile Unit</b>	
_____ gallons x \$0.45 =	\$0.00
_____ miles x \$3.50 =	\$0.00 Mobilization of Equipment
(round trip) minimum \$350.00	<b>\$0.00</b>
<b>(13) Pumping and Transportation of Contaminated Pit Water or Groundwater from an Open Pit</b>	
_____ gallons x \$0.25 =	\$0.00
minimum \$600.00	<b>\$0.00</b>
<b>(14) Disposal of Contaminated Pit Water or Groundwater in a Wastewater Treatment Plant or Recycling Facility</b>	
_____ gallons x \$0.45 =	\$0.00 max allowed
_____ cost + 8% =	\$0.00 actual cost
<b>(15) Laboratory Analysis</b>	
BTEX (MTBE included) _____ x \$75.00 =	\$0.00
MTBE (drinking water only) _____ x \$75.00 =	\$0.00
PAH _____ x \$207.00 =	\$0.00
Lead _____ x \$45.00 =	\$0.00
<b>Sludge and Cleaning Liquid Samples</b>	
Metals _____ x \$280.00 =	\$0.00
Volatiles _____ x \$335.00 =	\$0.00
Acid/base/neutrals _____ x \$430.00 =	\$0.00
Pesticides and Herbicides _____ x \$330.00 =	\$0.00
Ignitability _____ x \$50.00 =	\$0.00
Paint Filter Test _____ x \$43.00 =	\$0.00
Ph _____ x \$35.00 =	<b>\$0.00</b>
<b>(16) Over-Excavation Report</b>	
_____ report x \$2,660.00 =	<b>\$0.00</b>
<b>TOTAL ENTRY LEVEL</b>	
<b>\$0.00</b>	

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<b>REIMBURSEMENT WORKSHEET</b>	
<b>OVER-EXCAVATION</b>	
<b>CERTIFICATION</b>	
(1) _____	
Name of Owner/Operator	
(2) _____	
Mailing Address	
(3) _____	
City	State                      Zip
(5) _____	
Name of Contact Person	Telephone Number
<p>I certify under penalty of law that this documents and all attachments were prepared under my direction or supervision, that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information I certify that the submitted information is true, accurate and complete. I certify that all costs are necessary and were actually incurred in the performance of corrective action. I further certify that, if not the owner or operator, I am authorized by the owner or operator as an agent to make this certification, or I am the person certified under 401 KAR 42:314 and 42:316 and my (our) certification is in good standing.</p>	
(6) _____	(8) _____
Applicant Signature                      Date	Certified Contractor Signature                      CC #
(7) _____	(9) _____
Title of Applicant/Authorized Representative	Certified Company Rep. Signature      Certified Co. #
<b>FOR STAFF USE ONLY</b>	
Amount of Entry Level _____	Claim Request #: _____
Amount Met: Yes/No _____	
Total Amount Obligated: _____	
Total Amount Paid: _____	
Recommended to be Reimbursed: _____	
Staff: _____	
Branch Manager: _____	